

JONATHAN E. FIELDING, M.D., M.P.H.
Director and Health Officer

JONATHAN E, FREEDMAN Chief Deputy Director

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www.publichealth.lacounty.gov

October 13, 2009

The Honorable Board of Supervisors County of Los Angeles 383 Kenneth Hahn Hall of Administration 500 West Temple Street Los Angeles, California 90012

Dear Supervisors:



BOARD OF SUPERVISORS

Gloria Molina First District Mark Ridley-Thomas Second District

Zev Yaroslavsky Third District

Don Knabe Fourth District

Michael D. Antonovich Fifth District

ADOPTED

BOARD OF SUPERVISORS COUNTY OF LOS ANGELES

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OCTOBER 13, 2009

SACHI A HAMAI EXECUTIVE OFFICER

APPROVAL TO ACCEPT A NOTICE OF COOPERATIVE AWARD FROM THE CENTERS FOR DISEASE CONTROL AND PREVENTION FOR THE VARICELLA ACTIVE SURVEILLANCE PROJECT

(FIFTH DISTRICT) (3 VOTES)

SUBJECT

Approval to accept grant funds from the Centers for Disease Control and Prevention to support the Department of Public Health's Acute Communicable Disease Control Program's Varicella Active Surveillance Project and delegate authority to accept grant funds for future federal Fiscal Years through September 29, 2011.

The Honorable Board of Supervisors 10/13/2009 Page 2

IT IS RECOMMENDED THAT YOUR BOARD:

- 1. Approve and instruct the Director of the Department of Public Health (DPH), or his designee, to accept and execute Notice of Cooperative Agreement (NCA) Number 3U01IP000020-05S1 (Exhibit I) from the Centers for Disease Control and Prevention (CDC) to support the Acute Communicable Disease Control (ACDC) Program's Varicella Active Surveillance Project (VASP) operated by DPH for the period September 30, 2009 through September 29, 2010 (i.e., federal Fiscal Year [FFY] 2009-10), in the amount of \$305,000.
- Delegate authority to the Director of DPH, or his designee, to accept and execute future grant awards and/or amendments that are consistent with the requirements of NCA Number 3U01IP000020-05S1 that provide for the extension of the NCA term and acceptance of funding for FFY 2010-11 subject to review and approval by the County Counsel and the Chief Executive Office (CEO), and notification to your Board.
- 3. Delegate authority to the Director of DPH, or his designee, to accept and execute future amendments that are consistent with the requirements of NCA Number 3U01IP000020-05S1 that increase or decrease funding up to 30 percent of the FFY 2009-10 NCA or that permit the rollover of unspent funds, subject to review and approval by the County Counsel and the CEO, and notification to your Board.

PURPOSE/JUSTIFICATION OF RECOMMENDED ACTION

Approval of the recommended actions will support the VASP in the Antelope Valley, which provides for the continuity of varicella surveillance and other viral diseases study projects and for the expansion of new sites for adult herpes zoster surveillance.

Varicella is an infectious viral disease that causes chickenpox. The vaccine to immunize from varicella, named Varivax, was licensed in 1995. Varivax is used to immunize children 12 months of age and older. Varicella can also cause herpes zoster, commonly known as shingles which are painful rashes that sometimes appear after a person recovers from chickenpox.

VASP is a research project designed to evaluate the impact of the varicella vaccination program on the varicella disease (chicken pox) and herpes zoster (shingles), and other viral diseases, including the impact of disease control and prevention activities.

The ACDC Program collects surveillance data of varicella incidents and monitors the administration of vaccine usage by age group. Data collected is evaluated by the ACDC Program and reported to the CDC for nationwide analysis to establish national guidelines to prevent varicella. DPH follows the national guidelines issued by the CDC for the prevention and control of varicella and other viral diseases.

Implementation of Strategic Plan Goals

These recommended Board actions support Goal 4, Health and Mental Health, of the County Strategic Plan by providing data and information to implement strategies for the prevention and control of varicella and other viral diseases.

The Honorable Board of Supervisors 10/13/2009 Page 3

FISCAL IMPACT/FINANCING

The total estimated cost for VASP in Antelope Valley for FFY 2009-10 is \$357,050, of which \$305,000 will be offset by the CDC funds and \$52,050 is County in-kind contribution.

The County in-kind contribution provides programmatic and administrative staffing support to the project.

Funding for this project is included in DPH's Adopted Budget, Fiscal Year (FY) 2009-10 and will be requested in future FYs, as necessary.

FACTS AND PROVISIONS/LEGAL REQUIREMENTS

Since 1994, the CDC has awarded funding to DPH for the surveillance of varicella, herpes zoster, and other viral diseases based on a competitive re-solicitation.

The CDC funds will support four ongoing ACDC staff positions: 1) one full-time and one part-time Research Analyst I positions to assist in the fact-finding in the investigative phases of the study and conduct case history interview; 2) one full-time Research Analyst II who is responsible to all aspects of project data management, quality control, analysis, and reporting of surveillance and other survey results; and 3) one full-time Senior Typist Clerk who maintains and manages the paper flow of the project, enters the case logs and vaccine logs in the Access database and completes report forms.

County Counsel has approved Exhibit I as to form.

Attachment A is the Grant Management Statement for grants exceeding \$100,000.

The Honorable Board of Supervisors 10/13/2009 Page 4

CONTRACTING PROCESS

On December 14, 2004, your Board accepted the NCA Number IU01 IP000020-01 (Revised) for the continued support of VASP for FFY 2004-05 in the amount of \$223,000.

On March 7, 2006, your Board accepted NCA Number 5U01 IP000020-02 for the continued support of the VASP for FFY 2005-06 in the amount of \$308,628, and delegated authority to the Director of the Department of Health Services (now DPH) to accept subsequent NCAs for FFYs 2006-07, 2007-08, and 2008-09.

Subsequently, DPH exercised the delegated authority granted by your Board on March 7, 2006 to accept future NCAs and accepted NCA Number 5U01 IP000020-03 for FFY 2006-07 in the amount of \$308,441; NCA Number 5U01 IP000020-04 for FFY 2007-08 in the amount of \$304,643; and NCA Number 5U01 IP000020-05 for FFY 2008-09 in the amount of \$304,643, on December 8, 2006, November 2, 2007 and November 6, 2008, respectively.

On May 11, 2009, CDC issued a Non Competing Continuation, Program Announcement for VASP for an additional 12 months through September 29, 2010. DPH responded to the announcement and submitted an application on June 5, 2009 to CDC for the cost extension of VASP for the project period September 30, 2009 through September 29, 2010.

On August 18, 2009, DPH received NCA Number 3U01IP000020-05S1 from the CDC to continue VASP. Under this NCA, the CDC extended the project period effective September 30, 2009 through September 29, 1011 and provides funding for FFY 2009-10 in the amount of \$305,000.

IMPACT ON CURRENT SERVICES (OR PROJECTS)

Approval of the recommended actions will ensure that VASP continues in the Antelope Valley area.

Respectfully submitted,

JONATHAN E. FIELDING, M.D., M.P.H.

Director and Health Officer

JEF:ev

Enclosures

c: Chief Executive Officer
Acting County Counsel
Executive Officer, Board of Supervisors



Notice of Award

RESEARCH PROJECT COOPERATIVE AGREEMENT Issue Date: 08/14/2009

Department of Health and Human Services
Centers for Disease Control and Prevention





Exhibit I

Grant Number: 3U01IP000020-05S1

Principal Investigator(s): LAURENE MASCOLA, MD

Project Title: Varicella Active Surveillance Project

CHIEF OF OPERATIONS, PUB HLTH COUNTY/LOS ANGELES DEPT HLTH SER 313 N FIGUEROA ST, RM 808 LOS ANGLES, CA 90012

Budget Period: 09/30/2008 - 09/29/2011 Project Period: 09/30/2004 - 09/29/2011

Dear Business Official:

The Centers for Disease Control and Prevention hereby awards a grant in the amount of \$305,000 (see "Award Calculation" in Section I and "Terms and Conditions" in Section III) to LOS ANGELES DEPARTMENT OF PUBLIC HEALTH in support of the above referenced project. This award is pursuant to the authority of 42 USC 241 31 USC 6305 & 6306 and is subject to the requirements of this statute and regulation and of other referenced, incorporated or attached terms and conditions.

Acceptance of this award including the "Terms and Conditions" is acknowledged by the grantee when funds are drawn down or otherwise obtained from the grant payment system.

If you have any questions about this award, please contact the individual(s) referenced in Section IV

1). Brown

Sincerely yours,

Peaches O Brown

Grants Management Officer

Centers for Disease Control and Prevention

Additional information follows

SECTION I - AWARD DATA - 3U01IP000020-05S1

Award Calculation (U.S. Dollars) Salaries and Wages Fringe Benefits Personnel Costs (Subtotal) Equipment Supplies Travel Costs	\$171,620 \$81,605 \$253,225 \$2,200 \$2,863 \$2,399
Federal Direct Costs Federal F&A Costs Approved Budget Federal Share TOTAL FEDERAL AWARD AMOUNT	\$260,687 \$44,313 \$305,000 \$305,000 \$305,000

\$305,000

Fiscal Information:

CFDA Number:

AMOUNT OF THIS ACTION (FEDERAL SHARE)

EIN:

93.185 1956000927A1

Document Number:

UIP000020A

IC	CAN	2009
IP .	921018N	\$51,311
IP	921ZHYT	\$253,689

SUMMARY TOTAL FEDERAL AWARD AMOUNT YEAR (5)		
GRANT NUMBER	TOTAL FEDERAL AWARD AMOUNT	
3U01IP000020-05S1	\$305,000	
5U01IP000020-05	\$304,643	
TOTAL	\$609,643	

SUMMARY TOTALS FOR ALL YEARS		
YR	THIS AWARD	CUMULATIVE TOTALS
5	\$305,000	\$609,643

CDC Administrative Data:

PCC: R / OC: 4141 / Processed: BROWNPO 08/14/2009

SECTION II - PAYMENT/HOTLINE INFORMATION - 3U01IP000020-05S1

For payment information see Payment Information section in Additional Terms and Conditions.

INSPECTOR GENERAL: The HHS Office Inspector General (OIG) maintains a toll-free number (1-800-HHS-TIPS [1-800-447-8477]) for receiving information concerning fraud, waste or abuse under grants and cooperative agreements. Information also may be submitted by e-mail to hhstips@oig.hhs.gov or by mail to Office of the Inspector General, Department of Health and Human Services, Attn: HOTLINE, 330 Independence Ave., SW, Washington DC 20201. Such reports are treated as sensitive material and submitters may decline to give their names if they choose to remain anonymous. This note replaces the Inspector General contact information cited in previous notice of award.

SECTION III - TERMS AND CONDITIONS - 3U01IP000020-05S1

This award is based on the application submitted to, and as approved by, CDC on the above-titled project and is subject to the terms and conditions incorporated either directly or by reference in the following:

a. The grant program legislation and program regulation cited in this Notice of Award.

b. The restrictions on the expenditure of federal funds in appropriations acts to the extent those restrictions are pertinent to the award.

c. 45 CFR Part 74 or 45 CFR Part 92 as applicable.

- d. The HS Grants Policy Statement, including addenda in effect as of the beginning date of the budget period.
- e. This award notice, INCLUDING THE TERMS AND CONDITIONS CITED BELOW.

This award is funded by the following list of institutes. Any papers published under the auspices of this award must cite the funding support of all institutes.

National Center For Immunication And Respiratory Diseases (IP)

Treatment of Program Income:

Additional Costs

SECTION IV - IP Special Terms and Conditions - 3U01IP000020-05S1

Amendment One

The purpose of this Notice of Award is to grant a 12-month cost extension for the 05 budget period for the County of Los Angeles Department of Health Services. The revised budget period now covers the period from September 30, 2008 ? September 29, 2011. The revised project period covers the period from September 30, 2004 ? September 29, 2011 as requested in the application dated June 29, 2009. Funds are awarded as reflected in the attached spreadsheet, which is incorporated into the award by reference.

Revised Reporting Requirements: FSR and Final Progress report: Due Date: December 29, 2011.

All others terms and conditions of this award remains unchanged and in full effect, unless changed in writing by the Grants Management Officer.

STAFF CONTACTS

Grants Management Specialist: Debera Campbell Centers for Disease Control and Prevention OCOO/PGO/AABII 1600 Clifton Road, Mailstop: K-14

1000 Ciliton Road, Mailstop. Nº 14

Atlanta, GA 30333

Email: ftg3@cdc.gov Phone: 770.488.2686

Grants Management Officer: Peaches O Brown Centers for Disease Control and Prevention Procurement and Grants Office Koger Center, Colgate Building 2920 Brandywine Road, Mail Stop K 14 Atlanta, GA 30341

Email: prb0@cdc.gov Phone: 770-488-2738 Fax: 770-488-2670

SPREADSHEET SUMMARY

GRANT NUMBER: 3U01IP000020-05S1

INSTITUTION: LOS ANGELES COUNTY HEALTH SERVICES DEPT

Budget	Year 5	
Salaries and Wages	\$171,620	
Fringe Benefits	\$81,605	
Personnel Costs (Subtotal)	\$253,225	
Equipment	\$2,200	

Supplies	\$2,863	
Travel Costs	\$2,399	
TOTAL FEDERAL DC	\$260,687	
TOTAL FEDERAL F&A	\$44,313	
TOTAL COST	\$305,000	

Los Angeles County Chief Executive Office Grant Management Statement for Grants Exceeding \$100,000

Department: Public Health			
Grant Project Title and Description Varicella Active Surveillance Project			
Funding Agency	Program (Fed. Grant #State Bill or Code #) Grant Acceptance Deadline		
Centers for Disease Control and Prevention	Notice of Cooperative Agreement Number 3U01IP000020-05S1		Date of Board Approval
Total Amount of Grant Funding	: \$305,000	County Match Requires	ments: \$52,050
Grant Period: 09/30/2009-09/29/2010 Begin Date: 09/30/2009 End Date: 09/29/2010			9 End Date: 09/29/2010
Number of Personnel Hired Under this Grant: Full Time 3 Part Time 1			
Obligations Imposed on the County When the Grant Expires			
Will all personnel hired for this program be informed this is a grant funded program? Yes ☒ No ☐			
Will all personnel hired for this program be placed on temporary "N" items? Yes ☒ No ☐			Yes 🖾 No 🗌
Is the County obligated to continue this program after the grant expires Yes ☐ No⊠			Yes Nox
If the County is not obligated to continue this program after the grant expires, the Department will:			
a). Absorb the program cost without reducing other services Yes No 🗵		Yes ☐ No 🗵	
b). Identify other revenue sources		Yes □ No⊠	
(Describe)			
c). Eliminate or reduce, as appropriate, positions/program costs funded by this grant Yes 🗵 No 🗌			
Impact of additional personnel on existing space: None.			
Other requirements not mentioned above: None			
Department Head Signature Date 25-25-6)			